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APPLICANTS

Fysh Dadd, Meadowbank, AUSTRALIA;
 Peter Gibson, South Coogee, AUSTRALIA;
 Claudiu Treaba, Wollstonecraft, AUSTRALIA;

** CONTINUING DATA *****

none ok Bt3 8/22/07

** FOREIGN APPLICATIONS *****

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 4	TOTAL CLAIMS 73	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Borin Ceden</i> Examiner's Signature	<i>Bt3</i> Initials			

ADDRESS

30678

TITLE

COCHLEAR ELECTRODE ARRAY

FILING FEE RECEIVED 1940	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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